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CONFIRMATION NO. 7196

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|---|---|------------------------------------|--|--|
| SERIAL NUMBER 10/748,811 | FILING OR 371(c) DATE 12/30/2003 RULE | CLASS 604 | GROUP ART UNIT 3763 | ATTORNEY DOCKET NO. 51640/AWW112 |
| APPLICANTS Kristine B. Fuimaono, Covina, CA; Irma Hill, LaVerne, CA; | | | | |
| ** CONTINUING DATA ***** This application is a DIV of 09/692,494 10/19/2000 PAT 6,905,495 which is a CIP of 09/370,601 08/10/1999 PAT 6,852,120 <i>for</i> | | | | |
| ** FOREIGN APPLICATIONS ***** <i>None for</i> | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/29/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance | | STATE OR COUNTRY CA | SHEETS DRAWING 7 | TOTAL CLAIMS 27 |
| Verified and Acknowledged | | INDEPENDENT CLAIMS 2 | | |
| ADDRESS 23363 | | | | |
| TITLE Irrigation probe for ablation during open heart surgery | | | | |
| FILING FEE RECEIVED 896 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |